FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P94000065503 (2)

DOCUMENT #
1. Corporation Name MEERAMA, INC.

MEEKAN	AM, INC.									
Principal Place	of Business		Mailing Address				i indiinet iid ibiii dinii daiii daiii dai	1811) 481)4 8 11 9 1 (pider etti t	18187 (1)1 IBB1
375 SOUTH COUNTY RD PALM BEACH FL 33480				375 SOUTH COUNTY RD PALM BEACH FL 33480						
			THEM DESIGN TO				3. Date incorporated or Qualified			
2. Principa' Pla	no of Business		2a. Mailing Addres	88			4. FEI Number	<u> </u>		pplied For
z. Principa Pia 1	ne di phanesa	•	26	50			65-0522399		1	lot Applicable
Suite, Apt. #	, etc.		Suite, Apt. #,	etc.			5. Certificate of Status Desired			Additional Required
City & State			City & State				6. Election Campaign Financing		*	May Be
3			28				Trust Fund Contribution			to Fees
Ζφ		Country	Zip		Country		This corporation has liability for florida Statutes	intangible tax □ No	under s	199.032,
4	2		29	30	<u> </u>		10. Name and Address of New F		pent	
	9. Name a	nd Address of Cu	rrent Registered Agent		81	Name	10. 110110 0110 11010		·	
							O. C. Black and Acceptable	املا		
	g, peter s				82	Street Addr	ress (P.O. Box Number is Not Acceptat	ж		
	JVIAN AVE	100								
PALM BE	ACH FL 334	160			-				or 7	Code
					84	City		FL	85 Zı	Code
 Pursuant to prince register familiar with SIGNATURE 					Individual Answer	et ei voature neouice	wi when rensistrati	DATE		
familiar wit		printed name of royistered	agent and title if applicable			rt signature require	ad when reinstaling! ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
familiar wit SIGNATURE _ 12.	Signature, typed or	printed name of royistered		(NOTE: B	13.	nt signature require	od when renstating: ADDITIONS/CHANGES TO OFF	ICERS AND I	DIRECTO	RS IN 12
familiar wit SIGNATURE _ 12.	Signature, typed or	printed name of royistered OFFICERS	agent and title if applicable AND DIRECTORS	(NOTE: B	13.	nt signatura requira	ud when reinstating! ADDITIONS/CHANGES TO OFF	ICERS AND I		
familiar wit SIGNATURE _ 112. 11TLE NAME	Signature, typed or PTD LARKIE, J	printed name of royistered OFFICERS	agent and the II arquicable AND DIRECTORS DELE	(NOTE: B	13. 1.11TLE 1.2 NAME	rt signature require	ad when renistating! ADDITIONS/CHANGES TO OFF	ICERS AND I		
familiar wit SIGNATURE _ 12. TITLE NAME STHEET ADDRESS	PTD LARKIE, &	printed name of roystered OFFICERS O ANN TH COUNTY RD	agent and the II arquicable AND DIRECTORS DELE	(NOTE: B	13. 1.11TLE 1.2 NAME	I ADDRESS	ad when reinstating! ADDITIONS/CHANGES TO OFF	CERS AND I) Change	☐ Addition
familiar wit SIGNATURE _ 12. 11TLE NAME STHEET ADDRESS CITY-ST-ZIP	PTD LARKIE, &	printed name of royistered OFFICERS	agent and the II arquicable AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREET	f address St-zip	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND I		
familiar wit SIGNATURE _ 12. TITLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI	OFFICERS OFFICERS O ANN TH COUNTY RD ACH FL 33480 CHARD P	agent and the II amplicable AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 C/TY+S	1 AUDRESS ST-ZiP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND I) Change	☐ Addition
familiar wit SIGNATURE _ 12. 1111.F NAME STHEET ADDRESS CITY-S1-ZIP TITLE NAME	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the II amplicable AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 C-TY-S 2.1 TILE 2.2 N. ME	1 AUDRESS ST-ZiP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND I) Change	☐ Addition
familiar wit SIGNATURE	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS O ANN TH COUNTY RD ACH FL 33480 CHARD P	agent and the II amplicable 6 AND DIRECTORS DELE	(NOTE: B	13. 1. 1 TITLE 1.2 NAME 1.3 STREE 1.4 C TY - S 2 1 TILE 2 2 N ME 2 3 S REE 2 4 C Y	I ADDRESS ST-ZIP T ADDRESS ST-ZIP	ad when renstating) ADDITIONS/CHANGES TO OFF	C	Change	☐ Addition☐ Addition☐
familiar wit SIGNATURE	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the II amplicable AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREEL 1.4 C TY - S 2.1 TILE 2.2 N ME 2.3 S REE 2.4 C Y - S 3.1 TE	I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ad when reinstating) ADDITIONS/CHANGES TO OFF	C) Change	☐ Addition
familiar wit SIGNATURE	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the II amplicable 6 AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C TY -S 2.1 TILE 2.2 N ME 2.3 S HEE 2.4 C Y-S 3.1 T LE 3.2 N MAE	I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ad when reinstating? ADDITIONS/CHANGES TO OFF	C	Change	☐ Addition☐ Addition☐
FAMILIAN WITE 12. 12. 11TLE NAME STHEEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS STREEL ADDRESS STREEL ADDRESS	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the II amplicable 6 AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C T Y - S 2 1 T I I LE 2 2 N ME 2 3 S HEE 2 4 C Y - T 3 T LE 3 2 N ME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS	ad when reinstating? ADDITIONS/CHANGES TO OFF	C	Change	☐ Addition☐ Addition☐
Familiar wit SIGNATURE _ 12. 11TLE NAME STHEEL ADDRESS CITY-S1-ZIP TITLE NAME STREEL ADDRESS CITY-S1-ZIP TITLE NAME STREEL ADDRESS CITY-S1-ZIP	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the fl argical-lip 6 AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C T Y - S 2 1 T I I LE 2 2 N ME 2 3 S HEE 2 4 C Y - T 3 T LE 3 2 N ME	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND	Change	☐ Addition☐ Addition☐
familiar wit SIGNATURE 12. 12. 11LE NAME STHEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME THEET ADDRESS CITY-ST-ZIP TITLE	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the II amplicable 6 AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C TY - S 2 1 T ILE 2 2 N ME 2 3 S HEE 2 4 C Y - S 3 T LE 3 2 N MAF 3 S - SEE 3 4 C (I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND	Change Change	Addition Addition
familiar wit SIGNATURE 12. 11. 12. 11. 11. 11. 11. 1	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the fl argical-lip 6 AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C T Y - S 2 1 T TLE 2 2 N ME 2 2 S NEE 2 4 C Y - S 3 1 LE 3 2 N MAE 3 1 LE 3 1 LE 4 1 LE 4 2 RE	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND	Change Change	Addition Addition
FAMILIAN WITE 12. 11TLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the fl argical-lip 6 AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C TY - S 2 1 T I ILE 2 2 N ME 2 3 S REE 2 4 C Y - S 3 1 LE 3 2 N ME 3 3 - EE 4 1 F 4 1 E 4 2 ME 4 3 F	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND	Change Change Change	Addition Addition Addition
familiar wit SIGNATURE 12. 12. 13. 14. 15. 16. 16. 17. 17. 17. 17. 17. 17	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and the fl argical-lip 6 AND DIRECTORS DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C TY - S 2 1 T I ILE 2 2 N ME 2 3 S REE 2 4 C Y - S 3 1 LE 3 2 N ME 3 3 - EE 4 1 F 4 1 E 4 2 ME 4 3 F	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP -1 ADDRESS	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND	Change Change	Addition Addition
familiar wit SIGNATURE 12. 12. 13. 14. 15. 16. 16. 17. 17. 17. 17. 17. 17	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and site it applicable E AND DIRECTORS DELE DELE DELE DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C TY - S 2 1 T I ILE 2 2 N ME 2 3 S REE 2 4 C Y - S 3 1 LE 3 2 N MAE 3 1 LE 3 2 N MAE 4 1 E 4 2 ME 4 3 F 4 4 4 MAE	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP -1 ADDRESS	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND	Change Change Change	Addition Addition Addition
familiar wit SIGNATURE _ 12. 111. 12. 111. 13. 14. 15. 16. 16. 17. 17. 17. 17. 17. 17	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and site it applicable E AND DIRECTORS DELE DELE DELE DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C TV -S 2 1 TI ILE 2 2 N ME 2 3 S REE 2 4 C Y - 3 1 T LE 3 2 N MF 3 1 E 4 2 ME 4 1 F 4 2 ME 4 3 F 4 4 5 F 5 2	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP -1 ADDRESS	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND	Change Change Change	Addition Addition Addition
familiar with SIGNATURE	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	Bent and the II applicable E AND DIRECTORS DELE DELE DELE DELE DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 C TV -S 2 1 T ILE 22 N ME 23 S REE 24 C Y-S 31 LE 32 N ME 34 C (-4 T) E 42 ME 43 T 44 S 55 E 55 C	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP -1 ADDRESS ST-ZIP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND C	Change Change Change Change	Addition Addition Addition Addition
FAMILIAN WITE SIGNATURE 112. 111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	agent and site it applicable E AND DIRECTORS DELE DELE DELE DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 CTV-3 2.1 TITLE 2.2 N ME 2.3 STREE 2.4 C V-4 3.1 TLE 3.2 N ME 3.4 C V-4 4.1 F 4.2 ME 4.3 F 4.4 S 5.5 C 5.6 C	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP -1 ADDRESS ST-ZIP	ad when reinstating? ADDITIONS/CHANGES TO OFF	CERS AND C	Change Change Change	Addition Addition Addition
FAMILIAN WITE SIGNATURE 12. TITLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	Bent and the II applicable E AND DIRECTORS DELE DELE DELE DELE DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CTV-3 2.1 TITLE 2.2 N ME 2.3 STREE 2.4 C V-3 3.1 TLE 3.2 N ME 3.4 C V-4 4.1 F 4.2 ME 4.3 F 4.4 S 5.5 C 5.6 C 6.2	I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ad when renstating? ADDITIONS/CHANGES TO OFF	CERS AND C	Change Change Change Change	Addition Addition Addition Addition
FAMILIAN WITE SIGNATURE 111.E NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PTD LARKIE, & 375 SOU PALM BE VSD KLINE, RI 375 SOU	OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS OFFICERS	Bent and the II applicable E AND DIRECTORS DELE DELE DELE DELE DELE	(NOTE: B	13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 CTV-3 2.1 TITLE 2.2 N ME 2.3 STREE 2.4 C V-4 3.1 TLE 3.2 N ME 3.4 C V-4 4.1 F 4.2 ME 4.3 F 4.4 S 5.5 C 5.6 C	I ADDRESS ST-ZIP I ADDRESS ST-ZIP ET ADDRESS ST-ZIP -1 ADDRESS ST-ZIP	ad when renstating? ADDITIONS/CHANGES TO OFF	CERS AND C	Change Change Change Change	Addition Addition Addition Addition

SIGNATURE:

OANN Larkie 4/18/96 407-652-6776